PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE aperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/765,388 TRANSMITTAL Filing Date 01/27/2004 First Named Inventor **FORM** FLETCHER, Christopher L. Art Unit Examiner Name PHAM, Long (to be used for all correspondence after initial filing) Attorney Docket Number 03W085

Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC X Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC ✓ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a **Proprietary Information Provisional Application** After Final Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Acknowledgement receipt postcard Request for Refund **Express Abandonment Request** Replacement drawings 4 sheets Duplicate PTO/SB/17 CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Responsive to Office Action mailled July 19, 2005. Reply to Missing Parts/ Incomplete Application Title: PIN Detector Apparatus and Method of Fabrication Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name **RAYTHEON COMPANY** Signature 11/00 01 Bun Printed name William C. Schubert Date Reg. No. 2005-11-17 30,102 **CERTIFICATE OF TRANSMISSION/MAILING** I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature 2005-11-17 Date William C. Schubert Typed or printed name

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| | 1 TT A 1 | Application N | umber 1 | 0/765,388 | | | |
|--|------------------------------------|---------------------------|----------|------------------|-----------|--------------|-------------------|
| FEE TRANSMITTAL For FY 2005 | | | | Filing Date | 0 | 1/27/2004 | |
| | | | | First Named I | nventor F | LETCHER, C | Christopher L. |
| - Applicant of | 27 CED 1 27 | Examiner Nar | me P | HAM, Long | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | | Art Unit | 2 | 814 | |
| TOTAL AMOUN | T OF PAYMENT | (\$) | 120.00 | Attorney Dock | ket No. 0 | 3W085 | |
| METHOD OF | PAYMENT (ch | eck all that | apply) | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | |
| Deposit Account Deposit Account Number: 50-0616 Deposit Account Name: Raytheon Company | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | |
| ✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments | | | | | | | |
| under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card | | | | | | | |
| information and authorization on PTO-2038. | | | | | | | |
| FEE CALCUL | | | | | | | |
| BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES | | | | | | | |
| A | | Small | Entity _ | Small Entity | | Small Entity | , |
| Application | | (\$) <u>Fee</u> | | | Fee (\$ | | Fees Paid (\$) |
| Utility | 30 | | | | 200 | 100 | 0 |
| Design | 20 | | | | 130 | 65 | |
| Plant | 20 | _ | | | 160 | 80 | |
| Reissue | 30 | | | | 600 | 300 | |
| Provisional | 20 | 00 100 | 0 | 0 | 0 | 0 | 0 115 44 |
| 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) | | | | | | | |
| Each claim over 20 (including Reissues) | | | | | | 50 | 25 |
| Each independent claim over 3 (including Reissues) | | | | | | 200 | 100 |
| Multiple dependent claims | | | | | | 360 | 180 |
| Total Claims | | | | | | | Dependent Claims |
| | 20 or HP = mber of total claims | O X s paid for, if gre | | | | Fee (\$) | |
| Indep. Claims | | a Claims | | e Paid (\$) | | N/A | 0 |
| | or HP = | <u>0</u> x | = | 0 | | | 3 |
| HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | |
| - 100 = /50 = (round up to a whole number) x =0 | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) | | | | | | | |
| Other (e.g., late filing surcharge): Fee \$120 for responding within one (1) month | | | | | | | |
| SUBMITTED BY | | | | | | | |
| Signature | 1,000 | lulia | | Registration No. | 30 102 | Telep | hone 805/562-2108 |
| Name (Print/Type) William C. Schubert (Attomey/Agent) 30,103 | | | | | | | November 17, 2005 |

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